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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/706,627 FEE TRANSMITTAL Filing Date 11/12/2003 For FY 2006 First Named Inventor Jean Gorges **Examiner Name** Not Yet Known Applicant claims small entity status. See 37 CFR 1.27 Art Unit Not Yet Known TOTAL AMOUNT OF PAYMENT Attorney Docket No 10012 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: <u>502734</u> Deposit Account Name: Michael P. Mazza, LLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) 300 Utility 150 500 200 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 500 150 600 250 300 Provisional 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Multiple Dependent Claims -20 or HP =Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Surchage for late filing of Response to Office Action 120.00 SUBMITTED BY Registration No. 34,092 Signature Telephone (630) 858-5071 (Attorney/Agent) Date May 12, 2006 Name (Print/Type) Michael P. Mazza

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.